

4/3/1  
AO

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	4/6/02
2	4/6/03
3	4/10/03
4	4/10/03
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here